

				<b>STATE OF CALIFORNIA</b> <b>DEPARTMENT OF FOOD AND AGRICULTURE</b> <b>PLANT HEALTH AND</b> <b>PEST PREVENTION SERVICES</b>				<b>PDR NUMBER</b>				<b>Date collected</b> <div></div>			
								<b>Lab</b> <input type="checkbox"/> ENTO <input type="checkbox"/> PLANT PATH <input type="checkbox"/> NEMA <input type="checkbox"/> SEED <input type="checkbox"/> BOTANY <input type="checkbox"/> VERT				Time			
								NOR Number:							
								Number of samples:							
<b>Location</b>		<b>Owner/receiver</b>						<b>Collector</b>							
		Name						Affiliation    F    S    C    E    U    O    Describe other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							
<b>Activity</b>		Address/physical description						Quarantine shipper/broker							
								Name							
<b>Situation</b>		City		State		Zip code		Address							
Section		County						City							
Township    N S		Phone		Fax		Latitude		Zip code							
Range    E W		E-mail				Longitude		State/Country							
Base and meridian H    M    S		Cross street						Phone		Fax		Latitude			
		Quarantine destination						E-mail				Longitude			
<b>Quarantine origin (where host grown)</b>								<b>Carrier (ground/air/maritime)</b>							
City		County		State/Country		Zip code		Business name				Flight number			
Shipment size (include units)				Program				License plate		License state		Tail/ship number			
Submitter remarks								<b>General or Plant Pathology</b>							
								Number of <input type="checkbox"/> plants <input type="checkbox"/> acres    involved:							
								<input type="checkbox"/> Number <input type="checkbox"/> Percent    of plants affected:							
								Plant distribution: <input type="checkbox"/> Limited <input type="checkbox"/> Scattered <input type="checkbox"/> Widespread <input type="checkbox"/> Eradicated							
								<b>Plant parts affected</b>							
								<input type="checkbox"/> Bark <input type="checkbox"/> Bulbs or corms <input type="checkbox"/> Leaves, upper surface							
								<input type="checkbox"/> Blossoms <input type="checkbox"/> Fruit or nuts <input type="checkbox"/> Petiole <input type="checkbox"/> Stem							
								<input type="checkbox"/> Branches, large <input type="checkbox"/> Growing tips <input type="checkbox"/> Rootlets <input type="checkbox"/> Trunk							
								<input type="checkbox"/> Branches, terminal <input type="checkbox"/> Large roots <input type="checkbox"/> Seeds <input type="checkbox"/> Tubers							
								<input type="checkbox"/> Buds <input type="checkbox"/> Leaves, lower surface							
								<b>Plant symptoms</b> <input type="checkbox"/> Limited <input type="checkbox"/> General							
								<input type="checkbox"/> Canker <input type="checkbox"/> Gumming <input type="checkbox"/> Malformation <input type="checkbox"/> Slow decline							
								<input type="checkbox"/> Die back <input type="checkbox"/> Internal discoloration <input type="checkbox"/> Marginal burn <input type="checkbox"/> Stunting							
								<input type="checkbox"/> Fruit rot <input type="checkbox"/> Leaf fall <input type="checkbox"/> Root rot <input type="checkbox"/> Sudden collapse							
								<input type="checkbox"/> Fruit spot <input type="checkbox"/> Leaf mottling <input type="checkbox"/> Rough bark <input type="checkbox"/> Wilting							
								<input type="checkbox"/> Galls <input type="checkbox"/> Leaf spot <input type="checkbox"/> Shot hole <input type="checkbox"/> Yellowing							
<b>Suspect:</b>								Determination							
								Rating							
<b>Send report to</b>															
<b>Weed or Vertebrate</b>															
Acreage:    Net    Gross															
<b>Entomology</b>															
Trap number		Grid number		Last service date		Latitude									
Trap type		Trap density per		Longitude											
Total pest count or number per (sweep, leaf, acre, trap, root, stem, etc)						Survey method									
Count:    per															
Conditions <input type="checkbox"/> Dead <input type="checkbox"/> Alive <input type="checkbox"/> Unknown															
Stages <input type="checkbox"/> Egg <input type="checkbox"/> Larva <input type="checkbox"/> Nymph <input type="checkbox"/> Pupa <input type="checkbox"/> Adult															
<b>Sample</b>															
Lot number		Nema type (raw, vial, slide):													
<b>Host/crop name</b>															
Common name				Type (plants, fruit, seeds)											
Scientific name				Quantity		Units									
Container size:				Container units:											
Nema field block:    commercial    foundation    increase															
<b>PDR NUMBER</b>								Determined by:							
								Date:							